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FEE TRANSMITTAL For FY 2005		respond to a collection of information unless it displays a valid OMB control number Complete if Known				
		Application Number 09/662784				
		 _		September 15, 2000		
				Malcolm L. GEFTER		
		Examiner Name S. L. Tu		S. L. Turner	Turner	
Applicant claims small entity status. See 37 CFR 1.27		Art Unit 1649		1649		
TOTAL AMOUNT OF PAYMENT (\$) 910.00		Attorney Docket No. IMI-044DV:		IMI-044DV3CI	CNRCE2	
METHOD OF PAYMENT (check all that apply)						
Check Credit Card Money Order None Other (please identify):						
x Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)						
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee						
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17						
FEE CALCULATION						
1. BASIC FILING, SEARCH, AND EXAMINATION FEES						
FILING		ARCH FEES	EXAMIN	NATION FEES		
Application Type Fee (\$)	nall Entity Fee (\$) Fee (\$	Small Entity) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees I	Paid (\$)
Utility 300	150 500	250	200	100		
Design 200	100 100	50	130	65		
Plant 200	100 300	150	160	80		
Reissue 300	150 500	250	600	300		
Provisional 200	100 0	0	0	0		
2. EXCESS CLAIM FEES					Fee (\$)	Small Entity
Fee Description						Fee (\$)
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)					50 200	25 100
Multiple dependent claims					360	180
						160
Total Claims		<u>uiu (4)</u>	Fee (\$)		Fee Paid (\$)	
						4
Indep. Claims Extra Claims Fee	(\$) Fee F	Paid (\$)				
2 -3 = x =						
3. APPLICATION SIZE FEE						
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 152(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50						
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)						
- 100 = /50 (round up to a whole number) x =						
4. OTHER FEE(S) Fees Paid (\$)						
Other (e.g., late filing surcharge). 1801 Request for continued examination (RCE) (see 37 790.00						
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 790.00 1251 Extension for response within first month 120.00						
SUBMITTED BY						
Signature Bleve M.	Euri	Registration No. (Attorney/Agent)	41,710	Telephone	(617) 22	7-7400
Name (Print/Type) Jearne M. DiGiorgio Date March 6, 2006						